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PATENT TRADEMARK OFFICE

GNV19BUSA

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of) Group Art Unit: 1632
James M. Wilson et al)
Appln. No. 09/242,977) Examiner: R. Shukla
Filed: February 26, 1999)
For: METHOD FOR RECOMBINANT) July 31, 2002
ADENO-ASSOCIATED VIRUS-)
DIRECTED GENE THERAPY)

Commissioner for Patents
U.S. Patent and Trademark Office
Washington, DC 20231

CHANGE OF ADDRESS

Sir:

Applicants and the undersigned attorney have noted an error in the correspondence mailing address for the above-identified patent application. The Examiner in charge of the above-identified application recently issued an Office Action dated July 22, 2002, which was mailed to an incorrect address.

Applicants and the undersigned attorney respectfully request that the correspondence mailing address for the above application be corrected and all future correspondence for this application should be addressed to:

HOWSON AND HOWSON
Spring House Corporate Center
Box 457
Spring House, PA 19477
Telephone: (215) 540-9200
Telefacsimile: (215) 540-5818

CERTIFICATION OF TRANSMISSION UNDER 37 CFR §1.8

I hereby certify that this correspondence is being telefacsimile transmitted to the U. S. Patent and Trademark Office on July 31, 2002.

Signature Typed or Printed Name Debra N. Gerstemeier

The Director of the U. S. Patent and Trademark Office is hereby authorized to charge any deficiency in any fees due with the filing of this paper or credit any overpayment in any fees paid on the filing, or during prosecution of this application to Deposit Account No. 08-3040.

Respectfully submitted,

HOWSON AND HOWSON
Attorneys for the Applicants

By Cathy A. Kodroff
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GROUP 1600

OFFICIAL

TO: Examiner R. Shukla
 Group Art Unit 1632

DATE: July 31, 2002

REFERENCE: U. S. Patent Application No. 09/242,977 for "Method for Recombinant Adeno-Associated Virus-Directed Gene Therapy" (J. Wilson et al)
 Our Ref. GNV19BUSA

NUMBER OF PAGES (INCLUDING COVER SHEET): 4

TELECOPIER NUMBER OF RECIPIENT: 703-308-4242

OFFICIAL

Dear Examiner Shukla:

Attached is a two (2) page Change of Correspondence Address with a one (1) page Transmittal Form for the above-identified patent application.

Respectfully submitted,
 HOWSON AND HOWSON
 Attorneys for the Applicants

Cathy A. Kodroff
 Cathy A. Kodroff
 Registration No. 33,980

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(to be used for all correspondence after initial filing)

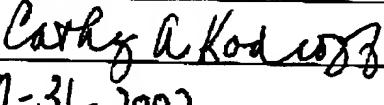
		Application Number	09/242,977
		Filing Date	02/26/1999
		First Named Inventor	James M. Wilson et al
		Group Art Unit	1632
		Examiner Name	R. Shukla
Total Number of Pages in This Submission	4	Attorney Docket Number	GNV19BUSA

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

2 pgs. Change of Correspondence Address

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Cathy A. Kodroff, Esquire Howson and Howson
Signature	
Date	7-31-2002

CERTIFICATE OF MAILING

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Signature		Date

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